

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission 23/02/2021 14:33 (SGT)
Date of Accident 09/02/2021 19:55 (SGT)
Exact Location of Accident Near 44 Jln Keria, Singapore 588557
Additional Location Information Along PIE > Tuas (Before Anak Bukit Flyover and near to Exit 26A)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBB7816H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner YONG TAI LOONG (PTE) LTD
Company Reg No 197201054D
Email Address oldfactory105@gmail.com
Mobile Phone No (Phone) +65-92986826
Alternative Phone No (Office) +65-62880355

VEHICLE PARTICULARS

Manufacturer Toyota
Model Dyna
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company AIG
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2070122967
Cover Note Number 30/09/2020-29/09/2021

DRIVER

Name of Driver Khaira Iqbal Singh
Passport No/FIN G2287371M
Date Of Birth 19/08/1988
Occupation Outdoor

Date Of Driving Pass	28/07/2019
Driving experience	1 YEAR AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83042480
Alt. Phone Number	-
Email Address	iqbalkhaira@gmail.com
Address	105 Neythal rd
Address complement	-
Postcode	628593
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	After Rain
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	JFR8733
Vehicle Category	Commercial vehicle

PASSENGER 1

Name	Satkartar Singh
Gender	Male

PASSENGER 2

Name	Rajwinder Singh
Gender	Male

PASSENGER 3

Name	Anbalagan Anantharaj
Gender	Male

PASSENGER 4

Name	Ramasamy Salamon
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Kindly refer to the Sketch Plan

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No
Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBB8312M
Vehicle Manufacturer Nissan
Vehicle Model Cabstar
Vehicle Variant -
Vehicle Colour -
Vehicle Category Commercial vehicle
Name of Driver Muthiah Palanisamy
Passport No/FIN G2366092Q
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) 6

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number JRF8733
Vehicle Manufacturer Isuzu
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Commercial vehicle
Name of Driver Mazwan Bin Rosnan
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Khaira Iqbal Singh
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained One Day Medical Leave
Injured person in which vehicle? GBB7816H
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person Satkartar Singh
Address -
Address Complement -

Post Code	-
Approximate Age Years Old	-
Injuries Sustained	One Day Medical Leave
Injured person in which vehicle?	GBB7816H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	Rajwinder Singh
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	One Day Medical Leave
Injured person in which vehicle?	GBB7816H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 4

Name of injured person	Passenger of GBB8312M
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBB8312M
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

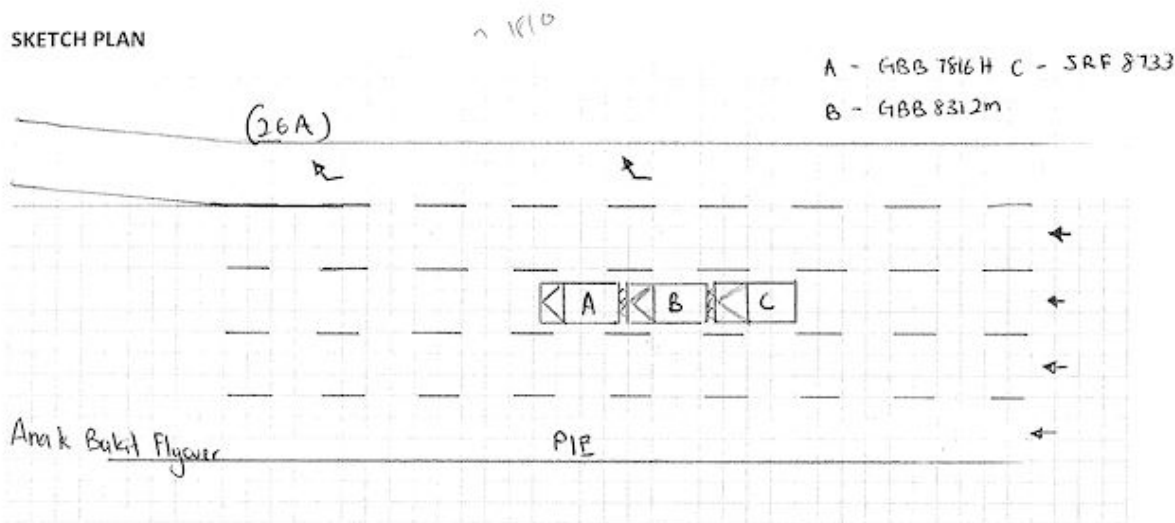
司公限有(人私)隆泰楊
YONG TAI LOONG (PTE.) LTD.
461, MACPHERSON ROAD
SINGAPORE 368179

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Rakeswaran Anand
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

<input type="checkbox"/>	Reporting Only
<input type="checkbox"/>	Claim OD
<input type="checkbox"/>	Claim TP
<input checked="" type="checkbox"/>	Claim OD/TP at other workshop

DECLARATION

We declare the foregoing particulars are true in every respect.

YONG TAI LOONG (PTE.) LTD.
461, MACPHERSON ROAD
SINGAPORE 368179

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Rakeshwar. Arind
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20210217/2057

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20210217/2057

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/02/2021 13:31		Vide Report No.:		Station Diary No.: 108
Informant's Particulars				
Name of Informant: KHAIRA IQBAL SINGH		Address: 105 Neythal Road SINGAPORE 628593		
ID Type / ID No.: FIN NO / G2287371M		Contact No.: Home/Office: Mobile: 83042480		
Nationality: INDIAN		Email:		
Sex: Male	Age: 32	Date of Birth: 19/08/1988	Type of Informant: Driver	
Race: Indian		Language:	Institution / School Name:	
Occupation: Lorry driver		Driving Licence Information: Class: 3		Date of Expiry: 27/07/2024

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 09/02/2021 19:55	Type of Location: Expressway
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Wet	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB7816H	Lorry	TOYOTA	Dyna 150 1.8 ton	Silver	Slightly Damaged	4
GBB8312M	Lorry			Red	Seriously Damaged	5
JRF8733	Lorry	ISUZU		White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20210217/2057

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Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20210217/2057

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBB7816H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070122967	30/09/2020	29/09/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Passenger				
Name	Satkartar Singh	ID No.	G8783279T	
Related Vehicle	GBB7816H (Lorry)	Contact No.	NIL	
Hospital/Clinic	ACUMED MEDICAL GROUP	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	10/02/2021	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight	
Driver				
Name	KHAIRA IQBAL SINGH	ID No.	G2287371M	
Related Vehicle	GBB7816H (Lorry)	Contact No.	83042480	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 27/07/2024	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
Passenger				
Name	Rajwinder Singh	ID No.	GBB7816H	
Related Vehicle	GBB7816H (Lorry)	Contact No.	NIL	
Hospital/Clinic	ACUMED MEDICAL GROUP	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	10/02/2021	Date Discharge	NIL	
No. of Days granted Medical Leave	01	Degree of Injury	Slight	



**SINGAPORE
POLICE FORCE**



T/20210217/2057

Police Station Of Origin:
Jurong West N.P.C
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Report No. T/20210217/2057

CONTINUATION OF REPORT

Driver			
Name	Muthiah Palanisamy	ID No.	G2366092Q
Related Vehicle	GBB8312M (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Mazwan Bin Rosnan	ID No.	791021055427
Related Vehicle	JRF8733 (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 09 Feb 2021 at about 1955hrs, I was travelling on PIE towards Tuas before Duneam road exit (Exit 26A). My lorry was at the second lane. Suddenly, the car in front of my lorry jammed break. I immediately stepped on my brake and my lorry skidded left and right while you are controlling my steering wheel. My lorry did not hit on the car.

Subsequently, the lorry behind me, GBB8312M, hit onto the rear of my lorry. I parked my lorry and switch on the hazzle light. I alighted my lorry and spoke to the driver, namely Muthiah. He informed me that the lorry bearing, JRF8733, hit on his rear lorry and subsequently collided onto my lorry. He had also called the traffic police. So, we waited at the roadside. Then the traffic ambassador arrived and guide us to park at the shoulder of the road. The traffic ambassador took our details and we waited for the traffic police to arrive. Soon, ambulance arrived and conveyed one passenger related to lorry bearing GBB8312M. I am not aware that someone was injured until the Ambulance arrived.

Subsequently, the Traffic Police arrived and taken our particulars. I have also exchange particulars with other party. I was advised to make a police report as soon as possible.

I would like to state that my lorry does not have in car camera and I cannot see the vehicle number who jammed break in front of me. The unknown car went out of sight when I realise my lorry was being hit. Previously, I have lodged police report no. T/20210210/7008 via SPF E-services with the assistance of my clerical supervisor. However, it was not lodge under my name. Thus, I came to post to lodge a report again.

(No)

On 09 Feb
2021
at 1955hrs



**SINGAPORE
POLICE FORCE**



T/20210217/2057

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Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20210217/2057

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20210217/2057

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20210217/2057

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /
Sgt 3 LOH JIAN HONG, DAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /

Sr Staff Sgt CHONG GUAN FATT
Contact No.: 65476083

SN 126

Authentication Stamp

Signature:

Singapore Police Force

Signature Of Informant:

KHAIYA IQBAL SINGH

Date/Time:
17/02/2021 13:31

Classification Of Case:













TOYOTA MOTOR CORPORATION JAPAN
 MODEL KDY231R-1LMKY
 ENGINE 1KD-ETV
 FRAME No. JTF-AT35Y1OK201185
 COLOR 199 EA12 P11
 TRIM
 PLANT
 OPTION
 TRANS./AXLE R451 A06B 753







